

APR 0 1 2002



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## ET687324984US

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Date of Deposit

I hereby certify that a Continued Prosecution Application and Petition for Extension of Time and their enclosures are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above, addressed to the

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Title:

**CHRYSANTHEMUM PLANT NAMED 95-157-6** 

Inventor:

Anderson et al.

## Enclosures:

- 1. CPA Request Transmittal Form
- 2. Fee Transmittal
- 3. Petition for Extension of Time Under 37 CFR 1.136(a)
- 4. Check in the amount of 1,430.00
- 5. Return Post Card

Aida Blekhman

(Typed or Printed Name of

Person Mailing Application)

(Signature of Person Mailing

Application)

Docket No.: BAL6019P0190US /P1570USA

83944/1 LVM

CH02/22179134.1

PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
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| for FY 2002                                                                         |                    |                                    | Application Number   |                   |                                     | 09/503,380                |                      |          |
|-------------------------------------------------------------------------------------|--------------------|------------------------------------|----------------------|-------------------|-------------------------------------|---------------------------|----------------------|----------|
| TOT FY 2002                                                                         |                    |                                    | Filing Date          |                   |                                     | February 14, 2000         |                      |          |
| Patent fees are subject to annual revision.                                         |                    |                                    | First Named Inventor |                   |                                     | Anderson, et al.          |                      |          |
| Applicant claims small entity status. See 37 CFR 1.27                               |                    | Examiner Name                      |                      |                   | Miche                               | lle Kizilkay              | ya _                 | APR (    |
| TOTAL AMOUNT OF PAYMENT \$1,430                                                     |                    | Group Art Unit Attorney Docket No. |                      |                   | 1661                                |                           | TE(                  | TH CENTE |
|                                                                                     |                    |                                    |                      |                   | No. BAL6                            | 019P0190U                 | IS .                 | " OENTE  |
| METHOD OF PAYMENT (check all that apply)                                            |                    |                                    |                      | FE                | E CALCULA                           | ATION (co                 | ontinued)            |          |
| Check Credit card Mone Other None                                                   |                    | DDITIO                             |                      |                   |                                     |                           |                      | *        |
| Deposit Account:                                                                    | Large<br>Fee       | Entity<br>Fee                      | Fee                  | Fee               |                                     | Description               | nn.                  | Fee Paid |
| Deposit<br>Account 07-0181                                                          | <b>Code</b><br>105 | <b>(\$)</b><br>130                 | Code<br>205          | <b>(\$)</b><br>65 | Surcharge - late                    | •                         |                      |          |
| Number                                                                              | 127                |                                    | 227                  |                   | _                                   | -                         | filing fee or cover  |          |
| Account Acrount Gardner Carton & Douglas                                            | 139                | 130                                | 139                  |                   | sheet<br>Non - English s            | pecification              |                      |          |
| The Commissioner is authorized to: (check all that apply)                           | 147                | 2,520                              | 147                  | 2,520             | For filing a requ                   | est for ex pa             | arte reexamination   |          |
| Charge fee(s) indicated below Credit any overpayments                               | 112                | 920*                               | 112                  | 920*              |                                     | lication of S             | IR prior to Examiner |          |
| Charge any additonal fee(s) during the pendency of this application                 | 113                | 1,840*                             | 113                  | 1,840*            | action<br>Requesting pub            | lication of S             | IR after Examiner    |          |
| Charge fee(s) indicated below, except for the filing fee                            | 115                | 110                                | 215                  |                   | action<br>Extension for re          | noly within fir           | et month             |          |
| to the above identified deposit account.                                            | 116                |                                    | 216                  |                   |                                     | •                         |                      |          |
| FEE CALCULATION                                                                     | 117                |                                    | 217                  |                   | Extension for re                    |                           |                      | 920.00   |
| 1. BASIC FILING FEE                                                                 | 118                |                                    | 218                  |                   | Extension for re                    |                           |                      | 72000    |
| Large Entity   Small Entity   Fee Fee Fee Fee Description   Fee Peid                | 128                | •                                  | 228                  | 980               | Extension for re                    | ply within fif            | th month             |          |
| Code (\$)         Fee Paid           101 740         201 370 Utility filing fee     | 119                | 320                                | 219                  | 160               | Notice of Appea                     | al                        |                      |          |
| 106 330 206 165 Design filing fee                                                   | 120                | 320                                | 220                  | 160               | Filing a brief in                   | support of ar             | n appeal             |          |
| 107 510 207 255 Plant filing fee 510.00                                             | 121                | 280                                | 221                  | 140               | Request for ora                     | l hearing                 |                      |          |
| 108 740 208 370 Reissue filing fee                                                  | 138                | 1,510                              | 138                  | 1,510             | Petition to instit                  | ute a public              | use proceeding       |          |
| 114 160 214 80 Provisional filing fee                                               | 140                | 110                                | 240                  | 55                | Petition to reviv                   | e - unavoida              | ble .                |          |
| SUBTOTAL (1) \$510.00                                                               | 141                |                                    | 241                  | 640               | Petition to reviv                   | e - unintentio            | onal                 |          |
| 2. EXTRA CLAIM FEES FOR UTILITY AND                                                 |                    | 1,280                              | 242                  |                   | Utility issue fee                   |                           |                      |          |
| Fee from<br>Extra Claims below Fee Paid                                             | 143                |                                    | 243                  |                   | Design issue fe                     | е                         |                      |          |
| Total Claims 1 -20** = 0 X = 0.00                                                   | 144                |                                    | 244                  |                   | Plant issue fee<br>Petitions to the | Commission                | nor.                 |          |
| Independent - 3** = 0 X = 0.00                                                      | 122<br>123         |                                    | 122<br>123           |                   | Processing fee                      |                           |                      |          |
| Multiple Dependent =                                                                | 123                |                                    | 126                  |                   | Submission of I                     |                           | •                    |          |
| Large Entity   Small Entity   Fee Fee Fee Fee Fee Description                       | 581                |                                    | 581                  |                   | Statement                           |                           | gnment per property  |          |
| Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20                            |                    |                                    |                      |                   | (times number of                    | of properties             | ) ' ' ' '            |          |
| 103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3 | 146                | 740                                | 246                  | 370               | Filing a submiss (37 CFR § 1.1      | sion atter fin:<br>29(a)) | ai rejection         |          |
| 104 280 204 140 Multiple dependent claim, if not paid                               | 149                | 740                                | 249                  | 370               | For each addition (37 CFR § 1.1     | onal inventio             | n to be examined     |          |
| 109 84 209 42 ** Reissue independent claims                                         | 179                | 740                                | 279                  | 370               | Request for Co                      |                           | mination (RCE)       |          |
| over original patent                                                                | 169                | 900                                | 169                  |                   | Request for exp                     |                           | nination             |          |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent             | Oth                | er fee (                           | specify)             |                   | of a design app                     | lication                  |                      |          |
| SUBTOTAL (2) \$0.00                                                                 |                    |                                    |                      |                   | ·                                   |                           |                      |          |
| **or number previously paid, if greater; For Reissues, see above                    | *Re                | duced b                            | y Basic              | : Filing I        | Fee Paid                            | SUBTO                     | TAL (3)              | \$920.00 |
| SUBMITTED BY  Complete (if applicable)                                              |                    |                                    |                      |                   |                                     |                           |                      |          |
| Name Lig V. Mueller                                                                 |                    | Registra<br>(Attorne               | ation No<br>v/Agent) | ).                | 38,978                              | Telephone                 | 312 644-3            | 000      |
| Signature                                                                           |                    | 1/                                 |                      |                   |                                     | Date                      | March 26, 2          | 002      |

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